

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 81811  
 Permit No. 103  
 Basin 103  
 NOTICE OF INTENT NO. 44565

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Harvey Pool ADDRESS AT WELL LOCATION 5710 Warpath Dr. Stagecoach, Nevada  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION SW SW 1/4 Sec. 2 T. 17 N/S R. 23 E. Lyon County  
 PERMIT NO. (Allowed) 015-434-11 Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other None

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Soil</u>		<u>0</u>	<u>3</u>	
<u>Clay</u>		<u>3</u>	<u>15</u>	
<u>Gravel and Clay</u>		<u>15</u>	<u>113</u>	
<u>Gravel Sand</u>	<input checked="" type="checkbox"/>	<u>113</u>	<u>140</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 140 Feet Depth Cased 140 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 1/4 Inches To 0 Feet 140 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8578</u>	<u>16.00</u>	<u>3/16</u>	<u>+1</u>	<u>140</u>

Perforations:  
 Type perforation Mill slot  
 Size perforation 1 1/4 x 4.25 in. 8 flows  
 From 1.00 feet to 140 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From 50 feet to 140 feet

9. WATER LEVEL  
 Static water level 68 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 8-12 2000  
 Date completed 8-13 2000

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>Produced about 20</u>	<u>6 PM</u>	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Leach Drilling Inc Contractor  
 Address P.O. Box 599 Contractor  
Silver Springs NV 89479  
 Nevada contractor's license number 0031841  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the 11877  
 Division of Water Resources, the on-site driller.  
 Signed Matthew Paul  
 By driller performing actual drilling on site or contractor  
 Date 8-16-00